

IDAHO DEPARTMENT OF WATER RESOURCES WELL DRILLER'S REPORT

Office Use Only	
Well ID No.	
Inspected by	T. King
Twp	57N Rge 5W Sec 7
	1/4 SW 1/4 SE 1/4
Lat:	: : Long: : :

1. WELL TAG NO. D D0033494
 DRILLING PERMIT NO. 809825
 Water Right or Injection Well No. _____

2. OWNER:
 Name City of Post Falls
 Address 408 N Spokane St
 City Post Falls State ID Zip 83854

3. LOCATION OF WELL by legal description:

You must provide address or Lot, Blk, Sub. or Directions to well.

Twp. 51 N North ☐ or South ☐
 Rge. 5 W East ☐ or West ☐
 Sec. 27 SW 1/4 SW 1/4 1/4
 Gov't Lot _____ County Kootenai

Lat: : : Long: : :
 Address of Well Site Pole line Rd + Spokane St
 City Post Falls

(Give at least name of road + Distance to Road or Landmark)

Lt. _____ Blk. _____ Sub. Name _____

4. USE:

☐ Domestic ☒ Municipal ☐ Monitor ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

5. TYPE OF WORK check all that apply (Replacement etc.)

☒ New Well ☐ Modify ☐ Abandonment ☐ Other _____

6. DRILL METHOD:

☐ Air Rotary ☒ Cable ☐ Mud Rotary ☐ Other _____

7. SEALING PROCEDURES

Seal Material	From	To	Weight / Volume	Seal Placement Method
Bentonite	0	60	8 lb	tremie

Was drive shoe used? ☒ Y ☐ N Shoe Depth(s) 300

Was drive shoe seal tested? ☐ Y ☒ N How? _____

8. CASING/LINER:

Diameter	From	To	Gauge	Material	Casing	Liner	Welded	Threaded
20	12	300	.375	steel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Length of Headpipe 10 Length of Tailpipe 10

Packer ☒ Y ☐ N Type neoprene

9. PERFORATIONS/SCREENS PACKER TYPE

Perforation Method _____

Screen Type & Method of Installation 304 stainless

From	To	Slot Size	Number	Diameter	Material	Casing	Liner
300	315	80		18"	stainless	<input type="checkbox"/>	<input type="checkbox"/>
315	325	100		18"	stainless	<input type="checkbox"/>	<input type="checkbox"/>
325	340	60		18"	stainless	<input type="checkbox"/>	<input type="checkbox"/>

10. FILTER PACK

Filter Material	From	To	Weight / Volume	Placement Method
None				

11. STATIC WATER LEVEL OR ARTESIAN PRESSURE:

237 ft. below ground Artesian pressure _____ lb.
 Depth flow encountered 245 ft. Describe access port or control devices: _____

51N 5W 27

12. WELL TESTS:

☐ Pump ☐ Bailor ☐ Air ☐ Flowing Artesian

Yield gal./min.	Drawdown	Pumping Level	Time
3000	3	240	6 hrs

Water Temp. _____ Bottom hole temp. _____

Water Quality test or comments: quality good

Depth first Water Encounter 245

13. LITHOLOGIC LOG: (Describe repairs or abandonment)

Bore Dia.	From	To	Remarks: Lithology, Water Quality & Temperature	Y	N
24	0	48	Brown silty sand + gravel		X
24	48	60	Brown sand + gravel cobbles		X
20	60	245	Brown sand + gravel cobbles with silty layers		X
20	245	350	Sand - gravel cobbles	X	

RECEIVED

SEP 20 2004

IDWR/North

RECEIVED

OCT 01 2004

IDWR/North

Completed Depth 350 (Measurable)

Date: Started 2/1/04 Completed 6/7/04

14. DRILLER'S CERTIFICATION

I/We certify that all minimum well construction standards were complied with at the time the rig was removed.

Company Name Holt Drilling Inc Firm No. 596

Principal Driller Iversen 596 Date 9/1/04

Driller or Operator II _____ Date _____

Operator I Walt Iversen Date _____

Principal Driller and Rig Operator Required.

Operator I must have signature of Driller/Operator II.